



**CERTIFICATE OF MAILING 37 C.F.R. 1.8(a)**

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November 13, 2006  
Date

Sharanda Mozart  
Sharanda Mozart

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

<b>Inventor(s):</b>	Ian Cottrell, et al.	<b>Confirmation No:</b>	7156
<b>Application No.:</b>	10/800,407	<b>Examiner:</b>	Elli Peslev
<b>Filing Date:</b>	March 12, 2004	<b>Group Art Unit:</b>	1623
<b>Title:</b>	Improved Anthelmintic Formulations	<b>Atty Docket No:</b>	085882.000022 (257122/0044)

**TRANSMITTAL LETTER**

Mail Stop RCE  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Dear Examiner:

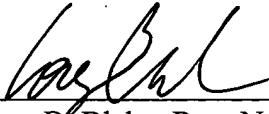
Enclosed herewith for filing in the above-identified case are:

- Check for \$1160 (\$790 RCE; \$250 additional claims, and \$120 One-Month Extension);
- Fee Transmittal;
- Power of Attorney (4 pgs.);
- Request for Continued Examination (RCE) Transmittal (1pg.);
- Amendment and Response to Office Action Dated July 11, 2006 (8 pgs.);
- Certificate of Mailing under 37 CFR 1.8(a);
- Petition for Extension of Time (One-Month) (2 pgs.); and
- Our return postcard, which we would appreciate your date stamping and returning to us upon receipt.

The record owners, through the enclosed Power of Attorney, have appointed the attorneys named therein as their attorneys. All previous powers of attorney have been revoked. The new attorney docket number is 085882.000022, although the previous attorney docket number will be included on future communications for the convenience of the Office.

The Director is hereby authorized to charge or credit any additional fees to Bracewell & Giuliani LLP, Deposit Account No. 50-0259 (Order No. 085882.000022).

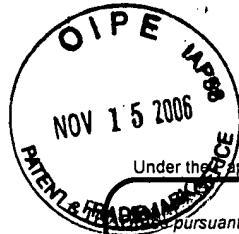
Respectfully submitted,



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Corey B. Blake, Reg. No. 52,624  
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Attorney for Applicants

Date: November 13, 2006



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# FEE TRANSMITTAL For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$)  
250

## Complete if Known

Application Number	10/800,407
Filing Date	March 12, 2004
First Named Inventor	Ian Cottrell
Examiner Name	Elli Peselev
Art Unit	1623
Attorney Docket No.	085882.000022 prev257122/0044

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 50-0259 Deposit Account Name: Bracewell & Giuliani LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 (including Reissues)

#### Small Entity

Fee (\$) Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

#### Total Claims

#### Extra Claims

#### Fee (\$)

#### Fee Paid (\$)

32 - 20 or HP = 5 x 50 = 250

#### Multiple Dependent Claims

#### Fee (\$) Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

#### Indep. Claims

#### Extra Claims

#### Fee (\$)

#### Fee Paid (\$)

4 - 3 or HP = 0 x 0 = 0

HP = highest number of independent claims paid for, if greater than 3.

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = 0

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_ 0

## SUBMITTED BY

Signature		Registration No. 52,624 (Attorney/Agent)	Telephone (713) 221-1515
Name (Print/Type)	Corey B. Blake @ Bracewell & Giuliani LLP		Date November 13, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.